PLUMAS COUNTY
ENVIRONMENTAL HEALTH DIVISION
FOOD SAFETY EVALUATION REPORT
270 County Hospital Rd., Ste 127 Quincy, CA 95971
Phone: (530) 283-6355  FAX (530) 283-6241

Date of Inspection: 12/14/18

Facility Name: Cheese Elys Loons #2621
Facility Site Address: 144 Main
City: Castern
Zip: 96020

Permit #: 18-155
Exp Date: 06/17/19
 Permit Holder: Cheese Elys Loons #2621

See reverse side for the code sections and general requirements that correspond to each violation listed below

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<th>OUT</th>
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<tr>
<td>1.</td>
<td>Demonstration of knowledge; food safety certification</td>
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<td>2.</td>
<td>Communication disease; reporting, restrictions &amp; exclusions</td>
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<td>3.</td>
<td>No discharge from eyes, nose, and mouth</td>
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<td>4.</td>
<td>Proper eating, tasting, drinking or tobacco use</td>
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<td>5.</td>
<td>Hands clean and properly washed; gloves used properly</td>
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<td>6.</td>
<td>Adequate handwashing facilities supplied &amp; accessible</td>
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<td>7.</td>
<td>Proper hot and cold holding temperatures</td>
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<td>8.</td>
<td>Time as a public health control; procedures &amp; records</td>
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<td>9.</td>
<td>Proper cooling methods</td>
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<td>10.</td>
<td>Proper cooking time &amp; temperatures</td>
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<td>11.</td>
<td>Proper reheating procedures for hot holding</td>
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<td>12.</td>
<td>Returned and re-service of food</td>
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<td>13.</td>
<td>Food in good condition, safe and unadulterated</td>
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<td>14.</td>
<td>Food contact surfaces: clean and sanitized</td>
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**DEMONSTRATION OF KNOWLEDGE**

Food Safety Cert Name: Dawn Price
Exp. Date: 05/16/21

**EMPLOYEE HEALTH & HYGIENIC PRACTICES**

**PREVENTING CONTAMINATION BY HANDS**

**TIME AND TEMPERATURE RELATIONSHIPS**

**FOOD STORAGE/ DISPLAY SERVICE**

24. Person in charge present and performs duties

PERSONAL CLEANLINESS

25. Personal cleanliness and hair restraints

GENERAL FOOD SAFETY REQUIREMENTS

26. Approved thawing methods used, frozen food

27. Food separated and protected

28. Washing fruits and vegetables

29. Toxic substances properly identified, stored, used

30. Food storage; food storage containers identified

31. Consumer self-service

32. Food properly labeled & honestly presented

EQUIPMENT/ UTENSILS/ LINENS

33. Nonfood contact surfaces clean

34. Warewashing facilities: installed, maintained, used; test strips

35. Equipment/ Utensils approved; installed; clean; good repair, capacity

36. Equipment, utensils and linens: storage and use

37. Vending machines

38. Adequate ventilation and lighting; designated areas, use

**SUPERVISION**

39. Thermometers provided and accurate

40. Wiping cloths; properly used and stored

PHYSICAL FACILITIES

41. Plumbing; proper backflow devices

42. Garbage and refuse properly disposed; facilities maintained

43. Toilet facilities: properly constructed, supplied, cleaned

44. Premises; personal cleaning items; vermin-proofing

PERMANENT FOOD FACILITIES

45. Floor, walls and ceilings: built, maintained, and clean

46. No unapproved private homes/ living or sleeping quarters

SIGNS REQUIREMENTS

47. Signs posted; last inspection report available

COMPLIANCE & ENFORCEMENT

48. Plan Review

49. Permits Available

50. Impoundment

51. Permit Suspension

Received by (Print): Jeff Lewis

Received by (Signature): Jeff Lewis

Specialist (Print): Pat Sauer

Specialist (Signature): [Signature]

Re-inspection Date: [Date]